

IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF PUERTO RICO

IN RE

\* BKRTCY. NO. 19-07143/MCF

RODRIGUEZ GONZALEZ CRITSIA NAIOMY \* CHAPTER 13  
XXX-XX-2045 \*

DEBTOR

**DEBTOR'S NOTICE OF FILING OF AMENDED SCHEDULES "I" and "J"  
OFFICIAL FORMS 106I & 106J**

**TO THE HONORABLE COURT:**

**COMES NOW, RODRIGUEZ GONZALEZ CRITSIA NAIOMY**, the Debtor in the above captioned case, through the undersigned attorney, and very respectfully states and prays as follows:

1. The Debtor is hereby submitting ***Amended Schedules "I" and "J"***, dated November 24, 2020, herewith and attached to this motion.
2. The amended Schedules "I" and "J" is filed **to inform the Debtor's actual income and expenses, in the above captioned case.**

**NOTICE PURSUANT TO LOCAL BANKRUPTCY RULE 1009(b)**

**Within thirty (30) days after service as evidenced by the certification, and an additional three (3) days pursuant to Fed. R. Bank. P. 9006(f) if you were served by mail, any party against whom this paper has been served, or any other party to the action who objects to the relief sought herein, shall serve and file an objection or other appropriate response to this paper with the Clerk's office of the U.S. Bankruptcy Court for the District of Puerto Rico. If no objection or other response is filed within the time allowed herein, the paper will be deemed unopposed and may be granted unless: (i) the requested relief is forbidden by law; (ii) the requested relief is against public policy; or (iii) in the opinion of the Court, the interest of justice requires otherwise.**

**Page -2-**  
**Notice of Amended Schedules "I" & "J"**  
**Case no. 19-07143/MCF13**

**CERTIFICATE OF SERVICE**

I CERTIFY, that on this same date a copy of this Notice was filed with the Clerk of the Court using the CM/ECF system which will send notice of same to the Chapter 13 Trustee, the US Trustee's Office, and all CM/ECF participants; I also certify that a copy of this notice was sent via regular US mail to the debtors and to all creditors and interested parties appearing in the master address list, hereby attached.

**RESPECTFULLY SUBMITTED.** In San Juan, Puerto Rico, this 24th day of November, 2020.

*/s/Roberto Figueroa Carrasquillo*  
USDC #203614  
RFIGUEROA CARRASQUILLO LAW OFFICE PSC  
ATTORNEY FOR the DEBTORS  
PO BOX 186 CAGUAS PR 00726  
TEL NO 787-744-7699 FAX 787-746-5294  
Email: [rfc@rfigueroalaw.com](mailto:rfc@rfigueroalaw.com)

Fill in this information to identify your case:

Debtor 1	CRITSIA NAIOMY RODRIGUEZ GONZALEZ
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF PUERTO RICO, SAN JUAN DIVISION
Case number (If known)	3:19-bk-7143

Check if this is:  
 An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.	Employment status	Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job, attach a separate page with information about additional employers.	Occupation	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
Include part-time, seasonal, or self-employed work.	Employer's name	Kitchen Assistant	
Occupation may include student or homemaker, if it applies.	Employer's address	La Taverna Mini Market & Sport Bar	
		Bairoa La 25 Ward Caguas, PR 00725	
	How long employed there?	3 years	

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$ 1,083.33	\$ N/A
3. Estimate and list monthly overtime pay.	+\$ 0.00	+\$ N/A
4. Calculate gross income. Add line 2 + line 3.	\$ 1,083.33	\$ N/A

Debtor 1 RODRIGUEZ GONZALEZ, CRITSIA NAIOMY

Case number (if known)

3:19-bk-7143

Copy line 4 here	For Debtor 1	For Debtor 2 or non-filing spouse
4. <u>  </u>	\$ <u>1,083.33</u>	\$ <u>N/A</u>
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>0.00</u>	\$ <u>N/A</u>
5b. Mandatory contributions for retirement plans	5b. \$ <u>0.00</u>	\$ <u>N/A</u>
5c. Voluntary contributions for retirement plans	5c. \$ <u>0.00</u>	\$ <u>N/A</u>
5d. Required repayments of retirement fund loans	5d. \$ <u>0.00</u>	\$ <u>N/A</u>
5e. Insurance	5e. \$ <u>0.00</u>	\$ <u>N/A</u>
5f. Domestic support obligations	5f. \$ <u>0.00</u>	\$ <u>N/A</u>
5g. Union dues	5g. \$ <u>0.00</u>	\$ <u>N/A</u>
5h. Other deductions. Specify: _____	5h.+ \$ <u>0.00</u>	+ \$ <u>N/A</u>
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <u>0.00</u>	\$ <u>N/A</u>
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ <u>1,083.33</u>	\$ <u>N/A</u>
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>0.00</u>	\$ <u>N/A</u>
8b. Interest and dividends	8b. \$ <u>0.00</u>	\$ <u>N/A</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <u>350.00</u>	\$ <u>N/A</u>
8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>N/A</u>
8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>N/A</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: <u>PAN</u>	8f. \$ <u>289.00</u>	\$ <u>N/A</u>
8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>N/A</u>
8h. Other monthly income. Specify: <u>DSO (Son) ASUME \$55/week</u>	8h.+ \$ <u>238.33</u>	+ \$ <u>N/A</u>
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <u>877.33</u>	\$ <u>N/A</u>
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>1,960.66</u>	+ \$ <u>N/A</u> = \$ <u>1,960.66</u>
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ <u>0.00</u>	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ <u>1,960.66</u>	
13. Do you expect an increase or decrease within the year after you file this form?	Combined monthly income	
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	<b>CRITSIA NAIOMY RODRIGUEZ GONZALEZ</b>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<b>DISTRICT OF PUERTO RICO, SAN JUAN DIVISION</b>
Case number (If known)	<b>3:19-bk-7143</b>

Check if this is:  
 An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

##### 2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.  Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Daughter	11	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes
Son	13	
Daughter	10	

##### 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I).

#### Your expenses

##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **322.88**

##### If not included in line 4:

4a. Real estate taxes  
4b. Property, homeowner's, or renter's insurance  
4c. Home maintenance, repair, and upkeep expenses  
4d. Homeowner's association or condominium dues  
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	<b>0.00</b>
4b. \$	<b>0.00</b>
4c. \$	<b>40.00</b>
4d. \$	<b>0.00</b>
5. \$	<b>0.00</b>

Debtor 1 <b>RODRIGUEZ GONZALEZ, CRITSIA NAIOMY</b>	Case number (if known)	<b>3:19-bk-7143</b>																																																																																													
<p><b>6. Utilities:</b></p> <table> <tr><td>6a. Electricity, heat, natural gas</td><td>6a. \$</td><td>50.00</td></tr> <tr><td>6b. Water, sewer, garbage collection</td><td>6b. \$</td><td>45.00</td></tr> <tr><td>6c. Telephone, cell phone, Internet, satellite, and cable services</td><td>6c. \$</td><td>90.00</td></tr> <tr><td>6d. Other. Specify: _____</td><td>6d. \$</td><td>0.00</td></tr> </table> <p><b>7. Food and housekeeping supplies</b></p> <table> <tr><td>7. \$</td><td>426.78</td></tr> </table> <p><b>8. Childcare and children's education costs</b></p> <table> <tr><td>8. \$</td><td>260.00</td></tr> </table> <p><b>9. Clothing, laundry, and dry cleaning</b></p> <table> <tr><td>9. \$</td><td>80.00</td></tr> </table> <p><b>10. Personal care products and services</b></p> <table> <tr><td>10. \$</td><td>120.00</td></tr> </table> <p><b>11. Medical and dental expenses</b></p> <table> <tr><td>11. \$</td><td>20.00</td></tr> </table> <p><b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.</p> <table> <tr><td>12. \$</td><td>140.00</td></tr> </table> <p><b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b></p> <table> <tr><td>13. \$</td><td>10.00</td></tr> </table> <p><b>14. Charitable contributions and religious donations</b></p> <table> <tr><td>14. \$</td><td>0.00</td></tr> </table> <p><b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.</p> <table> <tr><td>15a. Life insurance</td><td>15a. \$</td><td>0.00</td></tr> <tr><td>15b. Health insurance</td><td>15b. \$</td><td>0.00</td></tr> <tr><td>15c. Vehicle insurance</td><td>15c. \$</td><td>0.00</td></tr> <tr><td>15d. Other insurance. Specify: _____</td><td>15d. \$</td><td>0.00</td></tr> </table> <p><b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____</p> <table> <tr><td>16. \$</td><td>0.00</td></tr> </table> <p><b>17. Installment or lease payments:</b></p> <table> <tr><td>17a. Car payments for Vehicle 1</td><td>17a. \$</td><td>0.00</td></tr> <tr><td>17b. Car payments for Vehicle 2</td><td>17b. \$</td><td>0.00</td></tr> <tr><td>17c. Other. Specify: _____</td><td>17c. \$</td><td>0.00</td></tr> <tr><td>17d. Other. Specify: _____</td><td>17d. \$</td><td>0.00</td></tr> </table> <p><b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b></p> <table> <tr><td>18. \$</td><td>0.00</td></tr> </table> <p><b>19. Other payments you make to support others who do not live with you.</b> Specify: _____</p> <table> <tr><td>19. \$</td><td>0.00</td></tr> </table> <p><b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b></p> <table> <tr><td>20a. Mortgages on other property</td><td>20a. \$</td><td>0.00</td></tr> <tr><td>20b. Real estate taxes</td><td>20b. \$</td><td>0.00</td></tr> <tr><td>20c. Property, homeowner's, or renter's insurance</td><td>20c. \$</td><td>0.00</td></tr> <tr><td>20d. Maintenance, repair, and upkeep expenses</td><td>20d. \$</td><td>0.00</td></tr> <tr><td>20e. Homeowner's association or condominium dues</td><td>20e. \$</td><td>0.00</td></tr> </table> <p><b>21. Other:</b> Specify: _____</p> <table> <tr><td>21. +\$</td><td>0.00</td></tr> </table> <p><b>22. Calculate your monthly expenses</b></p> <table> <tr><td>22a. Add lines 4 through 21.</td><td>\$</td><td>1,604.66</td></tr> <tr><td>22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2</td><td>\$</td><td>1,604.66</td></tr> <tr><td>22c. Add line 22a and 22b. The result is your monthly expenses.</td><td>\$</td><td>1,604.66</td></tr> </table> <p><b>23. Calculate your monthly net income.</b></p> <table> <tr><td>23a. Copy line 12 (your combined monthly income) from Schedule I.</td><td>\$</td><td>1,960.66</td></tr> <tr><td>23b. Copy your monthly expenses from line 22c above.</td><td>-\$</td><td>1,604.66</td></tr> <tr><td>23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.</td><td>\$</td><td>356.00</td></tr> </table> <p><b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?</p> <p><input checked="" type="checkbox"/> No.</p> <p><input type="checkbox"/> Yes. Explain here: _____</p>			6a. Electricity, heat, natural gas	6a. \$	50.00	6b. Water, sewer, garbage collection	6b. \$	45.00	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	90.00	6d. Other. Specify: _____	6d. \$	0.00	7. \$	426.78	8. \$	260.00	9. \$	80.00	10. \$	120.00	11. \$	20.00	12. \$	140.00	13. \$	10.00	14. \$	0.00	15a. Life insurance	15a. \$	0.00	15b. Health insurance	15b. \$	0.00	15c. Vehicle insurance	15c. \$	0.00	15d. Other insurance. Specify: _____	15d. \$	0.00	16. \$	0.00	17a. Car payments for Vehicle 1	17a. \$	0.00	17b. Car payments for Vehicle 2	17b. \$	0.00	17c. Other. Specify: _____	17c. \$	0.00	17d. Other. Specify: _____	17d. \$	0.00	18. \$	0.00	19. \$	0.00	20a. Mortgages on other property	20a. \$	0.00	20b. Real estate taxes	20b. \$	0.00	20c. Property, homeowner's, or renter's insurance	20c. \$	0.00	20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00	20e. Homeowner's association or condominium dues	20e. \$	0.00	21. +\$	0.00	22a. Add lines 4 through 21.	\$	1,604.66	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	1,604.66	22c. Add line 22a and 22b. The result is your monthly expenses.	\$	1,604.66	23a. Copy line 12 (your combined monthly income) from Schedule I.	\$	1,960.66	23b. Copy your monthly expenses from line 22c above.	-\$	1,604.66	23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	\$	356.00
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<b>Fill in this information to identify your case:</b>			
Debtor 1	<b>CRITSIA NAIOMY RODRIGUEZ GONZALEZ</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<b>DISTRICT OF PUERTO RICO, SAN JUAN DIVISION</b>		
Case number (if known)	<b>3:19-bk-7143</b>		

Check if this is an amended filing

Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

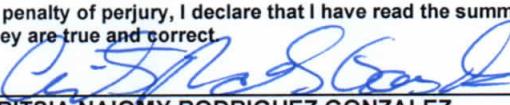
No

Yes. Name of person \_\_\_\_\_

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X

  
**CRITSIA NAIOMY RODRIGUEZ GONZALEZ**  
Signature of Debtor 1

X

Signature of Debtor 2

Date November 24, 2020

Date \_\_\_\_\_

Label Matrix for local noticing

0104-3

Case 19-07143-MCF13

District of Puerto Rico

Old San Juan

Tue Nov 24 14:52:03 AST 2020

US Bankruptcy Court District of P.R.

Jose V Toledo Fed Bldg & US Courthouse

300 Recinto Sur Street, Room 109

San Juan, PR 00901-1964

BANCO POPULAR DE PUERTO RICO (BDS)

BERMUDEZ, DIAZ & SANCHEZ LLP

PO BOX 362708

SAN JUAN, PR 00936-2708

POPULAR AUTO LLC

PO BOX 366818

SAN JUAN, PR 00936-6818

BANCO POPULAR DE PUERTO RICO

BERMUDEZ DIAZ & SANCHEZ, LLP.

PO BOX 362708

SAN JUAN, PUERTO RICO 00936-2708

POPULAR AUTO

BANKRUPTCY DEPARTMENT

PO BOX 366818

SAN JUAN PUERTO RICO 00936-6818

BANCO POPULAR DE PUERTO RICO

BANKRUPTCY DEPARTMENT

PO BOX 366818

SAN JUAN PR 00936-6818

BANCO POPULAR DE PUERTO RICO

BERMUDEZ DIAZ & SANCHEZ, LLP.

PO BOX 362708

SAN JUAN, PUERTO RICO 00936-2708

ALEJANDRO OLIVERAS RIVERA

ALEJANDRO OLIVERAS CHAPTER 13 TRUS

PO BOX 9024062

SAN JUAN, PR 00902-4062

CRITSIA NAIOMY RODRIGUEZ GONZALEZ

PARQUE LAS MERCEDES D8 LA CENTRAL ST

CAGUAS, PR 00725-7549

MONSITA LECAROZ ARRIBAS

OFFICE OF THE US TRUSTEE (UST)

OCHOA BUILDING

500 TANCA STREET SUITE 301

SAN JUAN, PR 00901

ROBERTO FIGUEROA CARRASQUILLO

PO BOX 186

CAGUAS, PR 00726-0186

The following recipients may be/have been bypassed for notice due to an undeliverable (u) or duplicate (d) address.

(d) Banco Popular de Puerto Rico  
Bankruptcy Department  
PO Box 366818  
San Juan, PR 00936-6818

End of Label Matrix  
Mailable recipients 12  
Bypassed recipients 1  
Total 13